**PROFIT** CORPORATION ANNUAL REPORT

1. Corporation Name



FLORIDA DEPARTMENT\_OF STATE

Katherine Harris

Secretary of State SION OF CORPORATIONS

## May 05, 1999 8:00 am Secretary of State

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NOEL HARTOUGH MUSIC, INC.



Principal Place of Business Maifing Address 1539 FERNANDO DRIVE 1539 FERNANDO DRIVE TALLAHASSEE FL 32303 TALLAHASSEE FL 32303 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 09/09/1998 Applied For . Momor . Morris Not Applicable \$8.75 Additional Fee Required 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees This corporation owes the current year intangible Yes Personal Property Tax. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent HARTOUGH, NOEL 82 1539 FERNANDO DRIVE TALLAHASSEE FL 32303 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered egent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Change Addition DELETE 1100F TITLE CR2E034 HARTOUGH, NOEL 1.2 NAME NAME 1539 FERNANDO DRIVE 1.3 STREET ADDRESS STREET ADDRESS TALLAHASSEE FL 32303 1.4 CITY-ST-ZIP CITY-ST-ZIP Addition [] Change DELETE 21 TITLE TIME 22 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZP Change Addition ☐ DELETE TITLE NAME 3.3 STREET ADDRESS STREET ADDRES 3.4. CITY-ST-ZIP CITY-ST-ZIP ☐ Addition DELETE 4.1 TITLE Change TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change DELETE 5.1 TITLE TITLE 52 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Addition 6.1 TILE Change DELETE TITLE 6.2 NAME NAME **8.3 STREET ADORESS** STREET ADDRESS 6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation of the properties of the corporation of the

SIGNATURE:

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